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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration  
Submitted  
With Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)Attorney Docket  
Number

MTCUS-1

First Named Inventor

NORIFUMI KOKAWA

## COMPLETE IF KNOWN

Application Number

10/549527

Filing Date

9/19/2005

Art Unit

Examiner Name

## I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ANTI-SEISMIC REINFORCEMENT AND EXPANSION METHOD FOR BUILDING AND  
ANTI-SEISMICALLY REINFORCED AND EXPANDED BUILDING

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

9/19/2005

as United States Application Number or PCT International

Application Number

10/549527

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
JP2003-78956 PCT/JP2003/005641	JAPAN	03/20/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	PCT	05/02/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:



The address associated with Customer Number:

27769

OR



Correspondence address below

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City

Newton

State

MA

ZIP

02466

Country

USA

Telephone

(617)558-5389

Email

acollins@akcpatents.com

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:



A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

NORIFUMI

Family Name or Surname

KOKAWA

Inventor's Signature

*Norifumi Kokawa*

Date

Residence: City

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State

Osaka

Country

JAPAN

Citizenship

JAPAN

Mailing Address

c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho

City

Yamatokoriyama-shi

State

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Zip

639-1042

Country

JAPAN

NAME OF SECOND INVENTOR:



A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

ITSUO

Family Name or Surname

KISHIMOTO

Inventor's Signature

*Itsuo Kishimoto*

Date

Residence: City

Kashiba-Shi

State

Osaka

Country

JAPAN

Citizenship

JAPAN

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City

Yamatokoriyama-shi

State

Nara

Zip

639-1042

Country

JAPAN



Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 1 of 5

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YUTAKA		UEGO	
Inventor's Signature <i>uego Yutaka</i>		Date	
Sennan-Gun Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho			
Mailing Address			
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YASUMASA		YAMAMOTO	
Inventor's Signature <i>Yasumasa Yamamoto</i>		Date	
Osaka-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho			
Mailing Address			
Yamatokoriyama-shi City	Nara State	639-1042 Zip	JAPAN Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
JYUNYA		SAKAI	
Inventor's Signature <i>Junya Sakai</i>		Date	
Osaka-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho			
Mailing Address			
Yamatokoriyama-shi City	Nara State	639-1042 Zip	JAPAN Country

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If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet <div style="text-align: right;">Page <u>2</u> of <u>5</u></div>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
MASAO		KOMORI	
Inventor's Signature <i>Masao Komori</i>		Date	
Osaka-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho			
Mailing Address			
Yamatokoriyama-shi City	Nara State	639-1042 Zip	JAPAN Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
SHOUZOU		TAKIGAWA	
Inventor's Signature <i>SHOUZOU TAKIGAWA</i>		Date	
Osaka-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho			
Mailing Address			
Yamatokoriyama-shi City	Nara State	639-1042 Zip	JAPAN Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
SHIGERU		KAYASUGA	
Inventor's Signature <i>SHIGERU KAYASUGA</i>		Date	
Takarazuka-Shi Residence: City	Hyogo State	JAPAN Country	JAPAN Citizenship
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Mailing Address			
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YORIKO		IKAWA	
Inventor's Signature <u>YORIKO IKAWA</u>		Date	
Suita-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho			
Mailing Address			
Yamatokoriyama-shi City	Nara State	639-1042 Zip	JAPAN Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
YAEKO		KIDA	
Inventor's Signature <u>Yae ko Kida</u>		Date	
Tondabayashi-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
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Mailing Address			
Yamatokoriyama-shi City	Nara State	639-1042 Zip	JAPAN Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
KOUTAROU		SHINJYOU	
Inventor's Signature <u>Koutaro Shiyou</u>		Date	
Higashiosaka-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 4 of 5

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
HIROSHI		TSUNOBE	
Inventor's Signature <i>Hiroshi Tsunobe</i>		Date	
Jobo-Gun Residence: City	Okayama State	JAPAN Country	JAPAN Citizenship
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
MINORU		TERADA	
Inventor's Signature <i>MINORU TERADA</i>		Date	
Osaka-Shi Residence: City	Osaka State	JAPAN Country	JAPAN Citizenship
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Mailing Address			
Yamatokoriyama-shi City	Nara State	639-1042 Zip	JAPAN Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
MASASHI		YAMASHITA	
Inventor's Signature <i>MASASHI YAMASHITA</i>		Date	
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Supplemental SheetPage 5 of 5

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
RYUJI		KOKAWA	
Inventor's Signature <u>RYUJI KOKAWA</u>		Date	
Yamatokoriyama-Shi	Nara	JAPAN	JAPAN
Residence: City	State	Country	Citizenship
c/o KABUSHIKI KAISHA MIRACLE THREE CORPORATION, 1086-106 Koizumi-cho			
Mailing Address			
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City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
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